PTO/SB/30 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE erwork Reduction Act of 1995, no persons are requ

## Request For Continued Examination (RCE) **Transmittal**

Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

<u>ired to respond to a collection of information unless it contains a valid OMB control numb</u>					
	Application Number	09/859,558			
	Filing Date	May 17, 2001			
	First Named Inventor	Gan et al.	仑		
	Art Unit	1745 C, do	) }		
	Examiner Name	L. Weiner			
	Attorney Docket Number	04645.0734			

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1.	amendme	ssion required under 37 CFR 1.114 Note: If ents enclosed with the RCE will be entered in the ord does not wish to have any previously filed unentered ent(s).	er in which they were	filed unless applicant instructs otherwise. If		
	a. X	Previously submitted. If a final Office action is outst considered as a submission even if this box is not of		ents filed after the final Office action may be		
	i.	Consider the arguments in the Appeal Brief of	r Rely Brief previously	filed on		
	li.	Other				
	b. 🗀	Enclosed	_			
	I.	Amendment/Reply	iji Info	ormation Disclosure Statement (IDS)		
	ii.	Affidavit(s)/ Declaration(s)	iv. 🔲 Oth	ner		
2.	Miscell	aneous				
	a.	Suspension of action on the above-identified appli				
	в. П	period of months. (Period of suspension s Other				
3.	Fees	The RCE fee under 37 CFR 1.17(e) is required by The Director is hereby authorized to charge the fo				
	а	Deposit Account No.				
	i.	X RCE fee required under 37 CFR 1.17(e)	En 10/27/2002 0	NUCKDAF1 00000106 09859558		
	ii.	Extension of time fee (37 CFR 1.136 and 1.17)	17.			
	iii	Other		770.00 OP		
	b	Check in the amount of \$	enc	closed		
	c. x	Payment by credit card (Form PTO-2038 enclosed)	Ť	: :		
		WARNING: Information on this form may be included on this form. Provide credit c				
		SIGNATURE OF APPLICANT,				
Name Signa	e (Print/Type ature	Wishael F. Scallse		Registration No. (Attorney/Agent) 34,920 Date October 29, 2003		
		CERTIFICATE OF MA	ILING OR TRANSMI			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.						
	(Print/Type		ise			
				Date October 20 2003		

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is fo file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

<b>7</b> · ·				
PTO/SB/17 (11/01) Approved for use thro	ough 10/31/2002, OMB 0651-	Application Number	09/859,558	750
FEE TRANSMITTAL		Filing Date	May 17, 2001	DO ELL
OCT 2 4 2003 5 for FY 20		First Named Inventor	Gan et al.	7-178 ED
Edtent Fees are subject to annual revision.		Examiner Name	L. Weiner	C , W3
Applicant claims small entity star	Group/Art Unit	1745	700	
PATIENT	(\$)770.00	Attorney Docket Number	04645.0734	

Deposit Account   Deposit Account Number   SQ2460   For Commissionary is bretoly sutherized to (check off the apply)	TO TAKE AMOUNT OF PAYMENT	(\$)770.00		Att	orney Doc	ket Number	04043.0734	
Popolis Account   Deposit Account Number:	METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)				
Pee	O Check Credit Card G Money Order G C	Other G None	3. ADD	ITIONAL FI	EES			
Code	, .	: <u>502460</u>	Larg	e Entity	Sma	ll Entity		
105   100   205   65   Surcharge - Interfilling fee or oath   S	•	k all that apply)					Fee Description	Fee Paid
G Charge any additional fees during pendency of this application.  G Charge fees indicated below, except for the filling fee to the above-defined deposit account to the above-defined deposit account of the state of the filling fee to the above-defined deposit account of the state of the filling fee to the above-defined deposit account of the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the above deposited of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the filling fee or cover at the state of the state of the filling fee or cover at the state of t	G Charge fee(s) indicated below		105	130	205	65	Surcharge - late filing fee or oath	\$
G Charge fees indicated below, except for the filling fee to the showe-dendified deposit account   139   130   139   130   Non-English specification   \$	-		127	50	227	25	Surcharge - late provisional filing fee or cover sheet	\$
L DASIC FILES OF FILE ACT FILE	-	ing fee						
LANSIC FILING FEE   Target Ratifs   Target R			147	2,520	147	2,520	For filing a request for ex parte reexamination	\$
Fee	1. BASIC FILING FEE		112	920*	112	920*	Requesting Publication of SIR prior to Examiner Action	\$
105   340   206   170   Design filing fee   \$   116   420   216   210   Extension for reply within second month   \$	Fee Fee Fee		V					
1107   500   207   265   Plant filing fee   \$   117   950   217   475   Extension for reply within third month   \$	101 770 201 385 Utility filing fee	\$	115	110	215	55	Extension for reply within first month	\$
108 770   208 385   Reissus filing fee   S   118   1.480   218   740   Extension for reply within fourth month   S	106 340 206 170 Design filing fee	\$	116	420	216	210	Extension for reply within second month	\$
114   160   214   80   Provisional filing fee   S   128   2,010   228   1,005   Extension for reply within fifth month   S	107 530 207 265 Plant filing fee	\$	117	950	217	475	Extension for reply within third month	\$
SUBTOTAL (1)   S   119   330   219   165   Notice of Appeal   S	108 770 208 385 Reissue filing fee	\$	118	1,480	218	740	Extension for reply within fourth month	\$
2. EXTRA CLAIM FEES FOR UTILITY/REISSUE   Extra   Fee from Claims   Fee from Claim	114 160 214 80 Provisional filing fee	. \$	128	2,010	228	1,005	Extension for reply within fifth month	\$
Extra   Fee From   Claims   1/ - 20** =   /	SUBTOTAL	\-/	119	330	219	165	Notice of Appeal	\$
Total Claims			120	330	220	165	Filing a brief in support of an appeal	\$
Independent Claims //- 3** = / / x // = \$ 138 1,510 138 1,510 Petition to institute a public use proceeding \$ \$ Multiple dependent			121	290	221	145	Request for oral hearing	\$
Multiple dependent				1.510	138	1.510		s
Pee   Fee								\$
10	Large Entity Small Entity		141	1,330	241	665	Petition to revive - unintentional	\$
103 18 203 9 Claims in excess of 20 143 480 243 240 Design issue fee \$ 102 86 202 43 Independent claims in excess of 3 144 640 244 320 Plant issue fee \$ 104 290 204 145 Multiple dependent claims over original patent 122 130 122 130 Petitions to the Commissioner \$ 109 86 209 43 **Reissue independent claims over original patent 123 50 123 50 Processing fee under 37 CFR 1.17(q) \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 126 180 126 180 Submission of Information Disclosure Statement \$ 126 180 126 180 Submission of Information Disclosure Statement \$ 127 SUBTOTAL (2) \$ 128 SUBTOTAL (2) \$ 129 581 40 581 40 180 Recording each patent assignment per property (times number of properties)  129 DATE: October 20, 2003 Telephone: (716) 759-5810 179 770 249 385 Request For Continued Examination (RCE) 5770 169 900 169 900 Request for Expedited Examination of a design appln. \$ 1 hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, the standria, VA 22313-1450 on October 20, 2003.	Fee Fee Fee		142	1.330	242	665		\$
104 290 204 145 Multiple dependent claim if not paid 122 130 122 130 Petitions to the Commissioner \$ 109 86 209 43 **Reissue independent claims over original patent 123 50 123 50 Processing fee under 37 CFR 1.17(q) \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 126 180 126 180 Submission of Information Disclosure Statement \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 126 180 126 180 Submission of Information Disclosure Statement \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 126 180 126 180 Submission of Information Disclosure Statement \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 126 180 126 180 Submission of Information Disclosure Statement \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 126 180 Submission of Information Disclosure Statement \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 126 180 Submission of Information Disclosure Statement \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 128 180 Submission of Information Disclosure Statement \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 128 180 Submission of Information Disclosure Statement \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 123 50 Information Disclosure Statement 123 50 Information Disclosure Statement 128 Information Disclosure Sta								\$
104 290 204 145 Multiple dependent claim if not paid 122 130 122 130 Petitions to the Commissioner \$ 109 86 209 43 **Reissue independent claims over original patent 123 50 123 50 Processing fee under 37 CFR 1.17(q) \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 126 180 126 180 Submission of Information Disclosure Statement \$ 126 180 126 180 Submission of Information Disclosure Statement \$ 127 SUBTOTAL (2) \$ 128 180 126 180 Submission of Information Disclosure Statement \$ 129 Nichael F. Scalise Reg. No. 34,920 149 770 246 385 Filing a submission after final rejection(37 CFR 1.129(a)) \$ 149 770 249 385 For each add'l invention to be examined(37 CFR 1.129(b)) \$ 149 770 279 385 Request For Continued Examination (RCE) \$ 169 900 169 900 Request for Expedited Examination of a design appln. \$ 1 hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, the kandria. VA 22313-1450 on October 20, 2003.	102 86 202 43 Independent claims in a	excess of 3	144	640	244	320	Plant issue fee	\$
109 86 209 43 **Reissue independent claims over original patent 123 50 123 50 Processing fee under 37 CFR 1.17(q)  \$ 110 18 210 9 **Reissue claims in excess of 20 and over original patent 126 180 126 180 Submission of Information Disclosure Statement \$ SUBTOTAL (2) \$ 581 40 581 40 Recording each patent assignment per property (times number of properties)  SIGNATURE:  Reg. No. 34,920 149 770 249 385 For each add'l invention to be examined(37 CFR 1.129(a)) \$  DATE: October 20, 2003 Telephone: (716) 759-5810 179 770 279 385 Request For Continued Examination (RCE) \$770  169 900 169 900 Request for Expedited Examination of a design appln.  SUBTOTAL (3) \$770  I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on October 20, 2003.			122	130	122	130	Petitions to the Commissioner	\$
110 18 210 9 **Reissue claims in excess of 20 and over original patent	109 86 209 43 **Reissue independent c							s
SUBTOTAL (2) \$ 581 40 581 40 Recording each patent assignment per property (times number of properties) \$  SIGNATURE:    146 770 246 385   Filing a submission after final rejection(37 CFR 1.129(a)) \$  Michael F. Scalise   Reg. No. 34,920   149 770 249 385   For each add'l invention to be examined(37 CFR1.129(b) \$  DATE: October 20, 2003   Telephone: (716) 759-5810   179 770 279 385   Request For Continued Examination (RCE) \$770    169 900 169 900   Request for Expedited Examination of a design appln. \$  Other fee (specify)   \$  *Reduced by basic filing fee paid   SUBTOTAL (3) \$770  I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on October 20, 2003.	110 18 210 9 **Reissue claims in exces	ss of 20 and						
SIGNATURE:    146   770   246   385   Filing a submission after final rejection(37 CFR 1.129(a))   \$   Michael F. Scalise   Reg. No. 34,920   149   770   249   385   For each add'l invention to be examined(37 CFR 1.129(b))   \$   DATE: October 20, 2003   Telephone: (716) 759-5810   179   770   279   385   Request For Continued Examination (RCE)   \$770     169   900   169   900   Request for Expedited Examination of a design appln.   \$   Other fee (specify)   \$   *Reduced by basic filing fee paid   SUBTOTAL (3)   \$770     I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, alexandria. VA 22313-1450 on October 20, 2003.							Recording each patent assignment per property (times	
Michael F. Scalise  Reg. No. 34,920  149  770  249  385  For each add'l invention to be examined(37 CFR1.129(b) \$  DATE: October 20, 2003  Telephone: (716) 759-5810  179  770  279  385  Request For Continued Examination (RCE)  \$770  169  900  169  900  Request for Expedited Examination of a design appln.  \$  Cher fee (specify)  \$  *Reduced by basic filing fee paid  \$  SUBTOTAL (3)  \$  \$770  I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, alexandria, VA 22313-1450 on October 20, 2003.	SUBTOTAL	(2)   \$   7.	581	40	581	40	number of properties)	
DATE: October 20, 2003 Telephone: (716) 759-5810 179 770 279 385 Request For Continued Examination (RCE) \$770  169 900 169 900 Request for Expedited Examination of a design appln. \$  Other fee (specify) \$770  I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on October 20, 2003.	SIGNATURE: M/Wal	colise	146	770	246	385	Filing a submission after final rejection(37 CFR 1.129(a))	\$
169 900 169 900 Request for Expedited Examination of a design appln.  Other fee (specify)  *Reduced by basic filing fee paid  SUBTOTAL (3)  Thereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on October 20, 2003.	Michael F. Scalise Reg. No. 34,920		149	770	249	385	For each add'l invention to be examined(37 CFR1.129(b)	\$
Other fee (specify)  *Reduced by basic filing fee paid  SUBTOTAL (3)  Thereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on October 20, 2003.	DATE: October 20, 2003 Telephone: (716)	759-5810	179	770	279	385	Request For Continued Examination (RCE)	\$770
*Reduced by basic filing fee paid SUBTOTAL (3) \$770  I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on October 20, 2003.			169	900	169	900	Request for Expedited Examination of a design appln.	\$
I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on October 20, 2003.			Other fe	e (specify)				\$
Mexandria, VA 22313-1450 on October 20, 2003.			*Reduce	ed by basic fil	ing fee paid	i	SUBTOTAL (3)	\$770
	Alexandria, VA 22313-1450 on October 20, 2003.	nce is being deposit	ed with the U	Jnited States I	Postal Servi		ass Mail in an envelope addressed to: Commissioner for Patents	•
MicHael F. Scalise  Mutantedia  Signature  October 20, 2003  Date of Signature	MicHaell- Jealise	_ <u>//</u> Signah	uta	stro	hae	<del></del>		